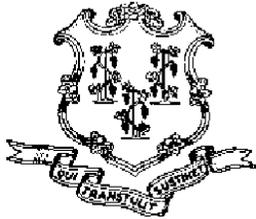


State of Connecticut



SCPRIIF

Special Contaminated Property Remediation and Insurance Fund

Full Application

The Special Contaminated Property Remediation and Insurance Fund
The Department of Economic & Community Development
505 Hudson Street, Hartford, CT 06106
TEL: (860) 270-8141
FAX: (860) 270-8157

Instructions

SCPRIF

Full Application

- 1. Complete the attached Full Application Form, including the Applicant Certification.**
- 2. Review the Project Selection Criteria – these will be helpful in responding to specific questions.**
- 3. Prepare an Executive Summary (one page or less) that includes an overview of the project, redevelopment goals and anticipated economic benefits.**
- 4. Discuss project feasibility by preparing a detailed narrative that addresses the following:**
 - The current use of the property including the percent occupied/leased.
 - The current environmental condition of the property including risks to public health or the natural environment and environmental benefits to be achieved if remediation is successful.
 - The redevelopment strategy, and mechanisms for implementation and approach to determining the financial feasibility of the project.
 - Methods of financing the project including sources of income for SCPRIF loan repayment, and other proposed project loans, commitment letters for additional financing, collateral, sources of equity, etc.
 - Ways in which the site, if redeveloped as proposed, would be consistent with municipal plans, policies, and initiatives.
 - Community and economic development benefits that are expected to result from redevelopment including the number of new jobs created, increased tax revenue, elimination of vacancy or blight, the reuse of the property in conformance with town and neighborhood plans, the stimulation of tourism, the generation of other community and economic benefits, the mitigation of environmental conditions that are depressing the neighborhood, or other benefits.
- 5. Assemble the following required attachments:**
 - Copies of the completed environmental documentation referenced in your Pre-Application that were used to develop cost estimates for the requested SCPRIF loan.
 - Known title encumbrances including an estimate of the amount of each lien.
 - Two independent estimates of the cost for full characterization of the site's environmental condition from a licensed environment professional or a similarly qualified environmental professional.

Instructions (Continued)

- ❑ A site plan at an appropriate scale showing the existing and proposed development.
 - ❑ Photograph(s) of the site as it currently exists.
 - ❑ If the site is currently occupied, provide detailed information on the present occupants including the type of businesses and/or residents, amount of area occupied, term of leases (including rents, and expenses paid by tenants), and plans for tenant relocation, if applicable.
 - ❑ For proposed demolition activities:
 - A copy of a building evaluation report prepared by a licensed professional engineer.
 - Documentation from the State Historic Preservation Officer indicating either that the structures and site have no cultural significance or that certain approvals will be necessary for demolition to take place.
 - An asbestos and hazardous materials survey (unless this will be done as part of the SCPRIF project).
 - Two independent cost estimates including lead abatement and asbestos removal costs, if applicable.
 - ❑ If the Applicant is, or has been, the owner or occupant of the subject property, it will be required to submit information on its historical use of the property and compliance with environmental laws and regulations.
 - ❑ A description of the previous experience of the Applicant in the redevelopment of similar properties and experience with brownfields.
 - ❑ An implementation plan showing tasks to be accomplished and proposed schedule with assigned responsibilities. The implementation plan should extend through the expected date of SCPRIF loan repayment.
 - ❑ For non-municipal Applicants only:
 - Letter of support from municipality for the proposed project
 - Letter from the property owner(s) indicating a willingness to participate in the SCPRIF program and a statement of their intentions/role in the proposed project
- 6. Complete the Detailed Budget Summary.**
 - 7. Complete the applicable Financial Information Form only if one was included in the application package.**
 - 8. If you are not a municipality, complete the Financial Disclosure Form.**

9. Review the following:

- Criteria for Canceling SCPRIF Loans
- Policy on Interest Rates and Repayment Dates for SCPRIF Loans
- SCPRIF Loan Closing Checklist

10. Complete the Non-Polluter Certification Form.

11. Submit the original Full Application and 10 copies of the Full Application including all attachments and supporting documents with the following exceptions: Only 3 copies of applicable environmental reports are necessary and the original and 10 copies of the Financial Disclosure Form should be placed in a separate envelope and labeled “Financial Disclosure Forms.” Send to:

Marie E. McGuinness, P.E., A.I.C.P.
CT Department of Economic & Community Development
Infrastructure & Real Estate Division
505 Hudson St.
Hartford, CT 06106T
Tel: 860/270-8148 Fax: 860/270-8157
Email: marie.mcguinness@po.state.ct.us
Web: www.state.ct.us/e.cd

Application Form

SCPRIF

Full Application

1. **Project Name:** _____
2. **Project Address:** _____

-
3. **Applicant:**
Name: _____
Address: _____

- Municipality/Organization: _____
- Type of Applicant: Municipality
 Property Owner
 Other Public Agency
 Other (Specify): _____

-
4. **Applicant Contact:**
- Name & Title: _____
Municipality/Organization: _____
Address: _____

- Tel: _____
Fax: _____
E-Mail: _____

-
5. **Municipal Contact (if different than Applicant):**
- Name & Title: _____
City/Town: _____
Address: _____

- Tel: _____
Fax: _____
E-Mail: _____

-
6. **Owner (if different than Applicant):**
Legal Name: _____
Contact: _____
Address: _____
City/Town: _____
Tel: _____
Fax: _____
E-Mail: _____

Application Form (Continued)

7. Financial Information

Current Assessment (municipal records) \$ _____

Has this site ever received prior state or federal funding? Yes No

<u>Source</u>	<u>Amount</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____

Are other loans or public funding applicable to the site? Yes No

<u>Source</u>	<u>Amount, Rate, Terms</u>	<u>Maturity</u>
_____	_____	_____
_____	_____	_____

8. Funding Request

Check the Activities Applicable:		Amount Requested:
Phase II Assessment	_____	\$ _____
Phase III Investigation	_____	\$ _____
Remedial Action Work Plan	_____	\$ _____
Asbestos/Lead Survey	_____	\$ _____
Asbestos/Lead Removal (demolition only)	_____	\$ _____
Demolition	_____	\$ _____
Total Funding Requested:		\$ _____

9. Access

Does applicant currently have legal access to property? Yes No

If no, how would access be gained and by when: _____

10. Ownership

Does the applicant own the property? Yes No

If no, indicate the timing and proposed method of taking ownership to the property:

11. Compliance

Does this site have any outstanding orders or citations from either the Connecticut Department of Environmental Protection or U.S. Federal Environmental Protection Agency? Yes No

If yes, complete the following section:

<u>Date</u>	<u>Order</u>	<u>Agency</u>	<u>Contact/Tel. No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Does this site have any outstanding orders or citations from the U. S. Occupational Safety and Health Administration? Yes No

If Yes, complete the following section:

<u>Date</u>	<u>Order</u>	<u>Agency</u>	<u>Contact/Tel. No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Application Form (Continued)

12. Certification by Applicant

It is hereby represented by the undersigned as an inducement to the Department of Economic and Community Development to consider the financial assistance requested herein, that to the best of my knowledge and belief no information or data contained in the application or in the attachments are in any way false or incorrect and that no material information has been omitted, including the financial statements. The undersigned agrees that banks, credit agencies, the Connecticut Department of Labor, the Connecticut Department of Revenue Services, the Connecticut Department of Environmental Protection, and other references are hereby authorized now, or anytime in the future, to give the Department of Economic and Community Development any and all information in connection with matters referred to in this application, including information concerning the payment of taxes by the applicant. In addition, the undersigned agrees that any funds that may be provided pursuant to this application will be utilized exclusively for the purposes represented in this application, as may be amended.

Signature: _____

Name (print or type): _____

Title: _____

Organization/Municipality: _____

Date: _____

To be completed by DECD:

Date Full Application Received by State for Review: _____

Date Full Application Reviewed by SCPRIIF Advisory Board: _____

Non-Polluter Certification Form*



Legal Name of Applicant: _____
Project Name: _____
Project Address: _____ (Town) _____

I hereby certify that to the best of knowledge and belief that neither _____, the entity applying for a SCPRIF loan from the State of Connecticut Department of Economic and Community Development, nor any individual, partnership, company or corporation related to the applicant through common ownership or control, has willfully or knowingly created a source of pollution in the State of Connecticut, or has negligently violated any provision of Chapter 446k of the Connecticut General Statutes.

Signature of Authorized Representative of Applicant Date signed

Name of Authorized Representative of Applicant Title

Mailing Address City/Town State Zip

Phone Number

STATE OF _____ }
COUNTY OF _____ } S.S. _____ (Town)

The foregoing was subscribed to and sworn to before me this _____ day of _____, _____ (year) by _____.

(Name of Signatory)

(Signature of Notary Public)

(Name of Notary Public)

My commission expires _____

*This form must be signed by an individual, responsible corporate officer, partner in a partnership, or member of an LLC, as applicable.

Financial Disclosure Form
(For Non-municipal Applicants)

SCPRIF

Full Application

BUSINESS NAME		<input type="checkbox"/> PROPRIETORSHIP/INDIVIDUAL/DBA	
		<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> LLC <input type="checkbox"/> LLP
		<input type="checkbox"/> CORPORATION C <input type="checkbox"/> SUB S <input type="checkbox"/>	
BUSINESS ADDRESS (Street/City, Zip Code)			
BUSINESS TELEPHONE		FAX	E-MAIL
NATURE OF BUSINESS			
ANNUAL SALES		NUMBER OF EMPLOYEES	FEDERAL TAX ID NUMBER/STATE ID NUMBER

PRINCIPALS/OWNERS

NAME	% OWNERSHIP	TITLE

BANK REFERENCES

BANK	ADDRESS	NAME OF CONTACT	PHONE NUMBER
			()
			()
			()

MAJOR TRADE SUPPLIERS

SUPPLIER	ADDRESS	NAME OF CONTACT	PHONE NUMBER
			()
			()
			()

OTHER BUSINESS OBLIGATIONS

NAME OF CREDITOR	PURPOSE OF DEBT	ORIGINAL AMOUNT	AMOUNTS PRESENTLY OWING	REPAYMENT TERMS	MATURITY DATE

Financial Disclosure Form (Continued)



MISCELLANEOUS

How long has the business been in operation? _____

Is the business an endorser, guarantor, or co-maker for obligations not listed on its financial statements? Yes No
 If YES, please indicate total contingent liability. \$ _____ To whom? _____
 Date obligation ends: _____

Is the business a party to any outstanding, pending or anticipated claims or lawsuit? Yes No
 If YES, please attach explanation.

Has the business, any of its owners, or any affiliated business ever declared bankruptcy? Yes No
 If YES, please attach explanation. Chapter _____ Date of Filing _____

Does the business owe any taxes for years prior to the current year? Yes No Amount \$ _____ Owed to _____

DOCUMENTS REQUIRED TO PROCESS YOUR LOAN

A. FINANCIAL INFORMATION
 RECD

- 1. Financial statements for the last 3 fiscal years, to include at least balance sheets and profit and loss statements.
- 2. Interim financial statement(s) if available.
- 3. Business tax returns for last 3 years.
- 4. Current Personal Financial Statements(s) and 3 years of the most recent Personal Tax Returns of any guarantor for the proposed loan.
- 5. A list of companies related to the applicant by substantially similar ownership and/or management control.

Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify DECD in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. DECD is authorized to make all inquiries necessary to verify the accuracy of the information contained herein, and to determine the credit worthiness of the undersigned.

BUSINESS NAME: _____

by: _____
 SIGNATURE/TITLE DATE SOCIAL SECURITY NO.

by: _____
 SIGNATURE/TITLE DATE SOCIAL SECURITY NO.